## DEPARTMENT OF HEALTH SERVICES

714/744 P STREET
1.0. BOX 942732
SACRAMENTO, CA 94234-7320
(916) 739-2501



December 19, 1989 CMSP Letter 89-7

TO: CMSP County Welfare irectors

SUBJECT: Revised CMSP 23 12/89) Form

This letter transmits a concern ready copy of the revised Caseload Movement and Activity Report (CMSP 237, dated 12/89). The form was changed in order to track workload units and associated administrative costs from the redefined CMSP Aid Code 50. In CMSP Letter 89-5 (November 30, 1989) you were notified of several changes to the County edical Services Program (CMSP) which included the redefinition of CMSP Aid Code 50 from CMSP full scope of benefits - "CM P IRCA" to emergency services only - "CMSP UNDOS."

Effective with January 990 activity county personnel should report data only on this evised CMSP 237. Data for all CMSP aid codes (including Aid Co e 50) should be combined and reported normally in lines 1-12. Aid Code 50 only data should then be extracted from lines 7 and 10 and recorded in lines 13 and 14 respectively.

The county is responsible for the reproduction of an adequate supply of this form usin' the enclosed camera ready copy. The county's remaining supply of outdated forms (9/84 Revision) should be destroyed upon tompletion of December 1989 reporting.

Please contact Genny Fleming of the CMSP Unit at (916) 739-2501 if you have questions conjerning this revision.

Sincerely,

Jim Martinez, Chief

County Medical Services Program

Enclosure

cc: CMSP Contact Persons

## CASELOAD MOVEMENT AND ACTIVITY REPORT

ounty Report Month		i	714 P Street			t of Health Services	
<u>L</u>		, 19			Attention: Genny Reming (Telephone: (916) 739-2501)		
NTAKE AND REDETERN	MINATION ACTIVITY						
1. Pending o	applications on hand at beginning of	n <b>onth</b>				1. [	
2. New appl	lcations, reapplications and restorate	ns.				2.	
3. Total appl	ications disposed of during month (a	b+c)				3.	
a	. Approvals	1	a.	Andrews Constitution of State			
ь	. Denicis		b.				
c	:. Withdrawais/Other		c.				
4. Pending o	applications carried torward to next rr	onth (1 + 2	- 3)			4.	
Retroacth	ve CMSP applications disposed of du	ng month	(a + b + c)			5.	
	a. Approvals	1	a.				
1	b. Denials		b.				
,	c. Withdrawais/Other		c.				
6. Annual re	edetermination of eligibility	•	'		······································	6.	
7. Total Inta	ke and redetermination activity (3 + 5	; ;;+ 6)				7.	
CONTINUING ACTIVIT	ry						
8. Continuir	ng cases on hand at beginning of mo	nth .				8.	
9. Cases ac	dded during month (a + b)	!				9.	
	a. Cases added form intake (3a)		a.				
	b. Other approvals		b.				
10. Total cor	ntinuing cases processed during mont	h (8 + 9)				10.	
11. Cases di	scontinued during month					11.	•
12. Continui	12. Continuing cases carried forward to next month (10 - 11)						
MIA/UNDOS ACTIVIT	Y ONLY (AID CODE 50)						
13. Intake and redetermination activity (portion of line #7 that is UNDOS ONLY)						13.	
14. Continuing cases processed during month (Portion of line #10 that is UNDOS ONLY)							
County person to co	entact regarding this report						
felephone Number		<u> </u>	Date Prepa	red			- 1
			pale riepo	wed.	1		•

<sup>\*</sup> This data will be used to compute total workload units, which are used as the basis for your CMSP eligibility allocation.